

**NON-PROVISIONAL
UTILITY PATENT APPLICATION
TRANSMITTAL - 37 CFR 1.53(b)**

Duplicate
(check, if applicable)

22264 U.S. PTO
10/665813
09/18/03

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.: 9249-53U1
First Named Inventor: Gary D. Giegerich
Express Mail Label No.: EV343988655US
Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

MULTI-GAME CABINET

which is:

an Original; or
a Continuation, Divisional, or Continuation-in-part (CIP)
of prior Application No. &@ filed&@.

Anticipated Group/Art Unit: &@ or Class &@, Subclass &@.

This non-provisional patent application is based on Provisional Patent Application No.
60/440,813, filed January 17, 2003.

Enclosed are:

- Specification (including Abstract) and claims: 9 pages.
- 7 sheets of drawings (formal).
- Application Data Sheet.
- Newly executed Declaration (copy of original).
- Copy of Declaration from prior application.
- Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).
- Microfiche computer program (Appendix).
- Nucleotide and/or Amino Acid Sequence Submission, including:
- Computer readable copy Paper Copy Verified Statement.
- Under PTO-1595 Cover Sheet, an assignment of the invention
- Name of Assignee: **DMI Sports, Inc.**
- Certified copy(ies) of &@ Application No(s). &@ filed &@ is/are filed:
 herewith or in prior application &@.

Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37 C.F.R. §1.27 as [] an Independent Inventor, or a Small Business Concern, or [] a Non-Profit Organization.

[] Preliminary Amendment.

[] Information Disclosure Statement, PTO/SB/08A, and cited references.

[] Request for Nonpublication of Application Under 35 U.S.C. §122(b)

[] Other: &@

The filing fee is calculated as follows:

CLAIMS	NO. FILED	NO. EXTRA	SMALL ENTITY		OR	LARGE ENTITY	
			BASIC FEE: \$375			BASIC FEE: \$750	
Total	10 - 20 =	-0-	X9	\$-0-	OR	X18	\$-0-
Independent	3 - 3 =	-0-	X42	\$-0-	OR	X84	\$-0-
[] Multiple Dependent Claims Present			\$140	\$-0-	OR	\$280	\$-0-
			TOTAL	\$375.00	OR	TOTAL	\$-0-

[] The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts

A check in the amount of **\$375.00** to cover the filing is enclosed.

The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 209249.0062)** as noted below. A duplicate copy of this sheet is enclosed.

Any overpayments or deficiencies in the above-calculated fee.

[] Filing fee in the amount of \$_____ as calculated above.

Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.

In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

9/18/03
(Date)

By:



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LLK:KBG:cbf

Enclosures